

ARTICLE I

BY LAWS OF HARPER COUNTY HEALTH DEPARTMENT/HARPER COUNTY
HOME HEALTH AGENCY

HARPER COUNTY HEALTH DEPARTMENT/HARPER COUNTY HOME HEALTH
AGENCY
P.O. BOX 66
123 N. JENNINGS
ANTHONY, KS 67003

THE HARPER COUNTY HEALTH DEPARTMENT AND THE HARPER COUNTY
HOME HEALTH AGENCY FUNCTION AS SEPARATE ENTITIES BUT WILL BE
REFERRED TO AS THE DEPARTMENT FOR THIS DOCUMENT.

ARTICLE II

THE DEPARTMENT WILL SERVE THE RESIDENTS OF HARPER COUNTY.
INDIVIDUALS IN THE HARPER COUNTY AREA. AGENCY SERVICES MAY
NOT PHYSICALLY BE PROVIDED OUTSIDE OF HARPER COUNTY, UNLESS
APPROVED BY THE HARPER COUNTY BOARD OF HEALTH, SUCH AS IN THE
EVENT OF A PUBLIC HEALTH EMERGENCY.

ARTICLE III

THE DEPARTMENT WILL STRIVE TO ASCERTAIN AND ADDRESS ALL
ASPECTS OF PUBLIC HEALTH AND HOME HEALTH NEEDS IN ADDITION TO
PROVIDING EDUCATION/COUNSELING/REFERRAL SERVICES FOR THE
PATIENT/CLIENTS AND THE GENERAL PUBLIC IN NEEDED AREAS.

ARTICLE IV

THE DEPARTMENT IS GOVERNED BY THE HARPER COUNTY BOARD OF
COUNTY COMMISSIONERS, AKA THE HARPER COUNTY BOARD OF HEALTH.
THE DEPARTMENT ADMINISTRATOR WILL MEET WITH THE BOARD OF
HEALTH AT LEAST QUARTERLY TO KEEP THE BOARD OF HEALTH AWARE
OF THE DEPARTMENT SERVICES AND NEEDS. THE BOARD OF HEALTH
ADOPTS AND ANNUALLY REVIEWS THE DEPARTMENT BY-LAWS AND
POLICIES. THE BOARD OF HEALTH HAS THE FINAL AUTHORITY IN ALL
DEPARTMENT MATTERS. THE BOARD OF HEALTH GENERALLY MEETS
WEEKLY ON EVERY TUESDAY MONDAY THAT THE COURTHOUSE IS OPEN.

THE BOARD OF HEALTH IS ASSISTED BY AN ADVISORY BOARD
CONSISTING OF THE DEPARTMENT ADMINISTRATOR, HEALTH OFFICER,

Harper County Health Department/Harper County Home Health Agency, 123 N. Jennings, Anthony, KS 67003-0066
Phone (620) 842-5132; Fax (620) 842-3152

Revised: October 24, 2016

MEDICAL CONSULTANT AND REPRESENTATION FROM THE HARPER COUNTY COMMUNITY. ONE CONSUMER EACH FROM FAMILY PLANNING AND HOME HEALTH CARE WILL BE INCLUDED ON THE ADVISORY BOARD. SERVICE TERMS FOR ADVISORY BOARD MEMBERS ARE UNLIMITED. THE ADVISORY BOARD WILL HAVE A FORMAL MEETING AT LEAST ANNUALLY TO REVIEW THE AGENCY'S POLICIES. THE ADVISORY BOARD WILL ADVISE THE AGENCY ON PROFESSIONAL ISSUES, PARTICIPATE IN EVALUATION OF THE AGENCY'S PROGRAMS, SERVE AS DEPARTMENT ADVOCATES WITH OTHER HEALTH CARE PROVIDERS IN THE COMMUNITY, SERVE AS THE AGENCY'S COMMUNITY INFORMATION PROGRAM AND ASSIST WITH OTHER NEEDS IDENTIFIED AND DELEGATED BY THE ADMINISTRATOR. THE ADMINISTRATOR WILL PROVIDE A REVIEW OF UTILIZATION OF DEPARTMENT SERVICES AT LEAST ANNUALLY TO THE ADVISORY BOARD.

THE DEPARTMENT WILL AT ALL TIMES COMPLY WITH THE REGULATIONS UNDER TITLE 42 OF THE U. S. C. OF THE U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES; SECTION 1861 OF THE SOCIAL SECURITY ACT; AND GUIDELINES SET FORTH BY THE KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT **OF FOR** PUBLIC HEALTH SERVICES AND **HOME HEALTH SERVICES**.

THE DEPARTMENT WILL NOT REFUSE SERVICE OR EMPLOYMENT OR DISCRIMINATE AGAINST ANY PERSON BECAUSE OF RACE, RELIGION, COLOR, SEX (INCLUDING PREGNANCY AND GENDER IDENTITY), SEXUAL ORIENTATION, FAMILIAL, MARITAL OR PARENTAL STATUS, NATIONAL ORIGIN, AGE, DISABILITY, FAMILY MEDICAL HISTORY OR GENETIC INFORMATION, POLITICAL AFFILIATION, MILITARY SERVICE, REPRISAL, ALL OR PART OF AN INDIVIDUAL'S INCOME IS DERIVED FROM ANY PUBLIC ASSISTANCE PROGRAM, OR ANY OTHER NON-MERIT BASED FACTOR.

ARTICLE V

SECTION I: PERSONNEL POLICIES ARE ESTABLISHED UPON APPROVAL FROM THE BOARD OF HEALTH, INCLUDING WRITTEN POLICIES CONCERNING QUALIFICATIONS, RESPONSIBILITIES, AND CONDITIONS OF EMPLOYMENT FOR EACH DISCIPLINE. THEY SHALL INCLUDE, BUT NOT BE LIMITED TO: HOURS OF WORK, EMPLOYMENT QUALIFICATIONS INCLUDING LICENSURES, REGISTRATIONS, OR CERTIFICATION WHEN APPLICABLE, EMPLOYEE LEAVE POLICIES, EVALUATION OF EMPLOYEE PERFORMANCE, JOB DESCRIPTIONS, AGENCY BENEFITS, AND OTHER RELATED PERSONNEL POLICIES.

SECTION II: THE DEPARTMENT FUNCTIONS ON THE CALENDAR YEAR. THE DEPARTMENT ADMINISTRATOR REVIEWS **FINANCIAL** REPORTS FROM THE COUNTY TREASURER MONTHLY AND AT THE END OF EACH YEAR.

SECTION III: THE DEPARTMENT ADMINISTRATOR REPORTS TO THE BOARD OF HEALTH AT LEAST QUARTERLY AND WITH INPUT FROM THE BOARD OF HEALTH AND PERSONNEL, WILL DETERMINE WHEN AND WHERE NEW PROGRAMS **OR** SERVICES WILL BE PROVIDED OR **CURRENT PROGRAMS/SERVICES WILL BE DISCONTINUED.**

SECTION IV: FEES WILL BE ESTABLISHED FOR THE SERVICES AT THE DISCRETION OF THE DEPARTMENT ADMINISTRATOR AFTER APPROVAL BY THE BOARD OF HEALTH. DELINQUENT ACCOUNTS WILL BE HANDLED AS PER THE FISCAL MANAGEMENT POLICIES.

ARTICLE VI

SECTION I: RECORDS: A) DATED MINUTES WILL BE MAINTAINED FOR ALL BOARD OF HEALTH AND ADVISORY BOARD MEETINGS AS A MEANS OF TRACKING PERTINENT DECISIONS. B) THE DEPARTMENT SHALL MAINTAIN CLINICAL RECORDS FOR ALL PATIENTS/CLIENTS INCLUDING ALL PERTINENT INFORMATION. RECORDS ARE SAFEGUARDED FROM LOSS OR DAMAGE AND ARE RETAINED PER STATE AND FEDERAL GUIDELINES. PROPER CREDENTIALS WILL BE REQUIRED OF ALL PERSONS BEFORE ACCESS TO RECORDS CAN BE OBTAINED. CLOSED RECORDS WILL BE STORED FOR A MINIMUM OF FIVE YEARS AFTER THE MONTH THE COST REPORT IS FILED. MEDICAL RECORDS ARE WRITTEN DOCUMENTS CONCERNING A PATIENT WHICH FORCES CONFIDENTIALITY STANDARDS TO BE APPLIED. A MEDICAL RECORD MAY CONSIST OF FOUR TYPES OF DATA (1) PERSONAL (2) FINANCIAL (3) SOCIAL AND/OR (4) MEDICAL. MEDICAL RECORDS WILL LEGALLY BE TREATED AS PROPERTY OF THE DEPARTMENT. THEY ARE NOT ACCESSIBLE TO THE PUBLIC WITHOUT AN ORDER FROM A DISTRICT COURT. THOUGH THE PATIENT MAY NOT OWN THE RECORD, HE/SHE DOES HAVE THE RIGHT TO ACCESS THE INFORMATION IN THE RECORD.

REGARDING THE RELEASE OF INFORMATION, A PATIENT MAY AUTHORIZE **YOU TO** **THE** RELEASE SOME OR ALL OF HIS/HER MEDICAL RECORD TO A THIRD PARTY. THIS CONSENT SHOULD BE IN WRITING AND SHOULD BE AN INFORMED CONSENT. INFORMED CONSENT MEANS THAT THE PATIENT IS AWARE OF WHAT INFORMATION WILL BE RELEASED AND FOR WHAT PURPOSE THE INFORMATION IS BEING RELEASED. AN AUTHORIZATION OF RELEASE SHOULD CONTAIN THE FOLLOWING:

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NAME OF PATIENT, ADDRESS, AND DATE OF BIRTH
NAME OF INDIVIDUAL OR AGENCY THAT IS TO RECEIVE THE
INFORMATION
TYPE OF INFORMATION BEING RELEASED
EXPIRATION DATE AS TO WHEN THIS RELEASE WOULD BE
INVALID
SIGNATURE OF PATIENT OR LEGAL REPRESENTATIVE AND DATE

THE AUTHORIZATION OF RELEASE SHOULD BE RETAINED AS PART OF THE PATIENT MEDICAL RECORD. DIRECT ACCESS TO THIS MEDICAL RECORD MAY BE MADE BY THE PATIENT. VERBAL RELEASES SHOULD BE LIMITED AND ONLY UTILIZED FOR EMERGENCIES. THE EMPLOYEE SHOULD VERIFY THE INFORMATION BY RETURNING THE CALL TO THE PATIENT AND HAVING THE PATIENT PROVIDE INFORMATION THAT WOULD JUSTIFY RELEASING THE INFORMATION. MAKE A RECORD OF THIS CONTACT AND PLACE IN PATIENT MEDICAL RECORD.

ALL ORIGINAL RECORDS SHOULD STAY IN THE PATIENT MEDICAL RECORD.

SECTION II: A) QUALITY ASSURANCE REVIEWS WILL BE COMPLETED ANNUALLY. THE DEPARTMENT WILL MAKE ARRANGEMENTS FOR THE REQUIRED PROFESSIONAL TO REVIEW A SAMPLING OF ACTIVE AND INACTIVE RECORDS TO MAINTAIN QUALITY OF CARE. B) THE OVERALL PROGRAMS WILL BE REVIEWED ANUALLY AND DOCUMENTED REGARDING PATIENT VISITS, AGE, DIAGNOSIS, DISCHARGES, AND/OR OTHER INFORMATION USEFUL TO THE TOTAL DEPARTMENT. THE DATA IS FILED AFTER THE BOARD OF HEALTH REVIEWS THE INFORMATION.

SECTION III: PLANNING: BUDGET PLANNING WILL BE DONE ANNUALLY IN COMPLIANCE WITH THE COUNTY REGULATIONS.

PROGRAM PLANNING IS AN ONGOING PROCESS INVOLVING DEPARTMENT PERSONNEL, THE ADVISORY BOARD MEMBERS, AND THE BOARD OF HEALTH, WITH FINAL APPROVAL FROM THE BOARD OF HEALTH PRIOR TO IMPLEMENTATION.

ARTICLE VII

THE HARPER COUNTY HOME HEALTH AGENCY AND THE HARPER COUNTY HEALTH DEPARTMENT WILL BE HOUSED TOGETHER, BUT WILL FUNCTION AS **INDIVIDUAL SEPARATE** ENTITIES. ALL ASPECTS OF THE HARPER COUNTY HOME HEALTH AGENCY WILL COMPLY WITH CMS PUBLICATION 11, THE MEDICARE HOME HEALTH AGENCY MANUAL, ALSO KNOWN AS THE HIM 11 OR THE MEDICARE MANUAL.

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ARTICLE VIII

ACCEPTANCE OF PATIENTS FOR MEDICARE HOME HEALTH SERVICES:

PATIENTS ACCEPTED FOR MEDICARE HOME HEALTH CARE MUST BE UNDER THE MEDICAL SUPERVISION OF A LICENSED PHYSICIAN AND MEET OTHER QUALIFYING FACTORS.

ADEQUATE PERSONAL CARE MUST BE AVAILABLE TO THE PATIENT IN THE INTERVAL BETWEEN **NURSING SKILLED** VISITS.

PATIENT AND PATIENT FAMILY (IF INVOLVED) SHOULD BE ACCEPTING OF THE HOME HEALTH CARE BEING PROVIDED IN THE HOME. PART-TIME OR INTERMITTENT SERVICES WILL BE PROVIDED ON A VISITING BASIS IN THE PATIENT PLACE OF RESIDENCE (WHERE THE PATIENT IS LIVING AT THE TIME SERVICES ARE PROVIDED).

PATIENT PLANS OF CARE ARE REVIEWED EVERY SIXTY DAYS OR SOONER IF THERE IS A SIGNIFICANT CHANGE IN PATIENT CONDITION THAT REQUIRES A CHANGE IN THE PLAN OF CARE.

PATIENTS NEEDING CARE, BUT NOT QUALIFYING FOR HOME HEALTH AGENCY SERVICES WILL BE OFFERED IN-HOME SERVICES THROUGH THE HARPER COUNTY HEALTH DEPARTMENT UNDER DIFFERENT FUNDING SOURCES.

ARTICLE IX

MEDICAL ORDERS:

WHEN ORDERS ARE RECEIVED VERBALLY, THEY WILL BE WRITTEN ON THE AGENCY'S HOME HEALTH **NURSING CARE OR PUBLIC HEALTH VERIFICATION OF DOCTOR'S VERBAL ORDER** FORM AND MAILED TO THE PHYSICIAN FOR VERIFICATION AND SIGNATURE.

MEDICAL ORDERS GIVEN TO THE FAMILY BY THE PHYSICIAN MAY BE ACCEPTED IF THE ORDERS ARE IN WRITING AND BEAR THE PHYSICIAN'S SIGNATURE.

MEDICAL ORDERS MUST BE GIVEN FOR TEACHING A FAMILY TO COMPLETE A MEDICAL TREATMENT WHEN IT IS NEEDED AND/OR INDICATED.

ARTICLE X

STAFF MEETINGS AND/OR INSERVICES WILL BE HELD AS NEEDED **PER PROGRAM GUIDELINES**. STAFF WILL COMPLETE CONTINUING EDUCATION COURSES REQUIRED TO MAINTAIN PROFESSIONAL LICENSURE AND POSITION TRAINING REQUIREMENTS.

BY-LAWS REVIEWED AND ADOPTED BY THE HARPER COUNTY BOARD OF COUNTY COMMISSIONERS/HARPER COUNTY BOARD OF HEALTH.

CARLA PENCE
CHAIRMAN OF THE BOARD OF HEALTH

DATE

LEE ADAMS
MEMBER OF THE BOARD OF HEALTH

DATE

BRIAN WALDSCHMIDT
MEMBER OF THE BOARD OF HEALTH

DATE